

EXHIBIT “A”

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF ALABAMA
EASTERN DIVISION

KYLE BENGSTON,

PLAINTIFF,

v.

DAVID BAZEMORE, O.D. et. al

DEFENDANTS.

3:06-cv-00569-MEF

AFFIDAVIT OF DR. PHIL ALABATA, D.O., PLAINTIFF'S CURRENT
PHYSICIAN

1.

I am Dr. Phil Alabata, D.O., a licensed physician in the State of Florida, and Board Certified in Ophthalmology. My Curriculum Vitae (hereinafter "cv") is attached hereto as Exhibit "B" detailing my credentials, professional activities and publications I have authored within the last ten (10) years.

2.

Based upon my review of office and exam notes of Dr. David Bazemore, O.D., which I do not have available, regarding optical care rendered to Kyle Bengtson, Plaintiff in the above-styled lawsuit, a review of notes regarding ophthalmologist care rendered to Kyle Bengtson by Dr. Gregory J. Sepanski, M.D., and my own examination and treatment of Kyle Bengtson, I offer the following opinion of the care provided to Kyle Bengtson by Dr. David Bazemore:

On August 20, 2004, Mr. Bengtson complained of "halos around lights" and blurry vision in the right eye. A complaint of halos and blurry vision is a common complaint

and often represents a refractive error with or without astigmatism. Dr. Bazemore performed a complete ophthalmic exam on Mr. Bengtson to include visual acuity, an intraocular pressure check, slit lamp and a dilated fundus exam. To my recollection, Mr. Bengtson was correctable by Dr. Bazemore's refraction to 20/20 in the involved eye. Mr. Bengtson's intraocular pressure by non-contact tonometry was within the normal range. In addition, his right optic nerve did not show abnormal cupping or asymmetry as compared to the left. In essence, Dr. Bazemore demonstrated an otherwise normal complete ophthalmic exam with a refractive error correctable to 20/20. If Mr. Bengtson complained about other symptoms such as "colored" halos around lights, a red painful eye, diminished vision or a headache and possibly nausea, a gonioscopy exam as well as an ophthalmology referral would have been indicated.

During a period of time from August 20, 2005, the time he saw Dr. Bazemore, and March 7, 2006, the time he saw Dr. Sepanski, Mr. Bengtson suffered damage to his right optic nerve. On March 7, 2006, Dr. Sepanski demonstrated this damage from his exam findings of a right afferent pupillary defect, increased optic nerve cupping as compared to Dr. Bazemore's findings and a "constricted" visual field. On gonioscopy by Dr. Sepanski, Mr. Bengtson had scattered peripheral anterior synechiae. Mr. Bengtson was diagnosed with synechial angle closure glaucoma due to either an old traumatic event - vs- ICE syndrome and was treated appropriately by Dr. Sepanski.

ICE syndrome is a spectrum of diseases with particular eye findings. Mr. Bengtson has essential iris atrophy which is a subset of ICE syndrome based on his iris stretch hole, a new finding as compared to Dr. Bazemore's exam. ICE syndrome presents as a

unilateral condition with unknown genetic predisposition. It is typically asymptomatic early in the disease process and may lead to glaucoma and severe visual loss if left untreated.

In my professional opinion, on August 20, 2004, because Mr. Bengtson did not have the stretch hole, did not have an elevated intraocular pressure, did not have an abnormal cupping of his optic nerve and was correctable to 20/20, it is uncertain whether or not a gonioscopy exam and/or a referral to an ophthalmologist would have revealed findings suggestive of intermittent angle closure or ICE syndrome. Early detection and treatment of any type of glaucoma can minimize optic nerve damage and correlated visual field loss. Unfortunately, Mr. Bengtson did not obtain further medical advice despite continued symptoms of intermittent "foggy" vision for several months. On March 7, 2006, after having headaches for 2-3 weeks, Mr. Bengtson sought medical attention and was examined by Dr. Sepanski. His intraocular pressure by contact tonometry was measured at 52 at that time. It is highly probable that Mr. Bengtson developed most of his optic nerve damage and correlated visual field loss during those preceding 2-3 weeks of headaches.

3.

I reserve the right to amend this opinion and it is subject to further discovery, including the reading of Dr. Bazemore's deposition.

Further Affiant sayeth not.

Phil C. Alabata, D.O.

Sworn and Subscribed Before Me
on this the _____ day of _____, 2007

Notary Public

State of Florida
County of _____
